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32376 7590 04/26/2005

LAWRENCE R. YOUST
DANAMRAJ & YOUST, P.C.
5910 NORTH CENTRAL EXPRESSWAY
SUITE 1450
DALLAS, TX 75206

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<i>Ruthine Liebman</i>	(Depositor's name)
<i>Ruthine Liebman</i>	(Signature)
<i>July 11, 2005</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/796,467	03/09/2004	Ronald W. McGregor	2001-IP-003099 UIPIC1 USA	2289

TITLE OF INVENTION: APPARATUS AND METHOD FOR TREATING AN INTERVAL OF A WELLBORE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	NO	\$1400
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\$300	\$1700	07/26/2005
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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WALKER, ZAKIYA NICOLE	3672	166-278000
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input checked="" type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1. <u>Lawrence R. Youst</u> 2. _____ 3. _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

HALLIBURTON ENERGY SERVICES, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY) **07/14/2005 MBIZUNE2 00000044 080300 10796467**

HOUSTON, TEXAS U.S.A. **01 FC:1501 1400.00 DA**
02 FC:1504 300.00 DA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Issue Fee
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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number **08-0300** (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Scott F. Mendorf

Date **July 11, 2005**

Typed or printed name Scott F. Mendorf

Registration No. **48,029**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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